

Federal Bureau of Prisons

Type or use ball-point pen. If attachments are needed, submit four copies. One copy of the completed BP-229(13) including any attachments must be submitted with this appeal.

From: Nellson, Edward, L. 31408-007 D-2 USP Canaan  
LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

Part A - REASON FOR APPEAL

Regarding Admin. Remedy #928154-FI, I will not entertain the lies & fantasies put forth by the staff of USP's Big Sandy & Hazelton. Nothing can get past the fact that I was denied treatment, that my records were falsified, and that there was/is an ongoing cover up. I have had a separated shoulder for some 18 months, untreated. I am only now, after 2 YEARS, seeing a physical therapist. I have seen no neurologist yet. I am undiagnosed as yet. <sup>except seizures</sup> This violates my constitutional rights. I want: 1) medical care 2) Transfer to a medically appropriate Facility 3) staff investigated & disciplined 4) monetary damages 5) my BEMR corrected. You are caught. Resistance will only get YOU more involved.

3-8-18

DATE

Edward Nellson

SIGNATURE OF REQUESTER

Part B - RESPONSE

DATE

If dissatisfied with this response, you may appeal to the General Counsel. Your appeal must be received in the General Counsel's Office within 30 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

REGIONAL DIRECTOR

CASE NUMBER: 928154R1

Part C - RECEIPT

CASE NUMBER: \_\_\_\_\_

Return to: \_\_\_\_\_  
LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

SUBJECT: \_\_\_\_\_

DATE

SIGNATURE, RECIPIENT OF REGIONAL APPEAL

